PTO/SB/21 (08-00)

Approved for use through 10/31/2002. OMB 0651-0031

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TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

Application Number	10/008,488	
Filing Date	11/05/200	器
First Named Inventor	Siegfried	屬12Q
Group Art Unit	2161	2 20 13
Examiner Name	T. Dixon	TO BE
Attomey Docket Number	P-1783	W E

	ENCL	OSURES (check all that apply)	
XX Fee Transmittal Form		nent Papers Application)	After Allowance Communication Group	on
XX Fee Attached	Drawing	g(s)	Appeal Communication to Bo of Appeals and Interferences	ard
Amendment / Reply	Licensi	ng-related Papers	Appeal Communication to Gr (Appeal Notice, Brief, Reply Brief)	oup
After Final	Petition		Proprietary Information	
Affidavits/declaration(s)	Provision	to Convert to a onal Application	Status Letter	
Extension of Time Request	Change Address	of Attorney, Revocation of Correspondence s	Other Enclosure(s) (please identify below):	
Express Abandonment Request		al Disclaimer st for Refund		
X Information Disclosure Statement	CD, Nu	ımber of CD(s)		
Certified Copy of Priority Document(s) Response to Missing Parts/ Incomplete Application Response to Missing Parts under 37 CFR 1.52 or 1.53	Remarks	Disclos officia	enter the Informatio sure Statement in the al file along with th ons thereon.	
SIGNATI	JRE OF APPL	CANT, ATTORNE	Y, OR AGENT	
Firm or Charles Individual name	J. Pres	scott, P.A	• 12/25/2003 Nasfrui - 00000028 100084 8	A
Signature Chas	lest	At		0.00 CP
Date March 11,	2003	i		

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PTO/SB/17 (01-03)
Approved for use through 04/30/2003. OMB 0651-0032
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	for	FY	2003	3

Effective 01/01/2003. Patent fees are subject to annual revision.

X Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$) 180.

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Co	mplete if Known	
Application Number	10/008/488	
Filing Date	11/05/2001	N
First Named Inventor	Siegfried K	Holz
Examiner Name	T. Dixon	O S C
Art Unit	2161	D 8 1
Attorney Docket No.	P-1783	

METHOD OF PAYMENT (check all that apply)	MENT (check all that apply) FEE CALCULATION (continued)					60 1000
X Check Credit card Money Other None	3. ADDITIONAL FEES					
Deposit Account:	Large Entity Small Entity					0
Deposit Account	Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid
Number	1051	130	2051	65	Surcharge - late filing fee or oath	
Deposit Account Name	1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet	
The Commissioner is authorized to: (check all that apply)	1053	130	1053	130	Non-English specification	 .
Charge fee(s) indicated below Credit any overpayments	1812	2,520	1812	2,520	For filing a request for ex parte reexamination	
Charge any additional fee(s) during the pendency of this application	1804	920*	1804	920*	Requesting publication of SIR prior to Examiner action	
Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.	1805	1,840*	1805	1,840*	Requesting publication of SIR after Examiner action	
FEE CALCULATION	1251	110	2251	55	Extension for reply within first month	
1. BASIC FILING FEE	1252	410	2252	205	Extension for reply within second month	<u> </u>
Large Entity Small Entity	. 1253	930	2253	465	Extension for reply within third month	
Fee Fee Fee Fee Description Fee Paid Code (\$) Code (\$)	1254	1,450	2254	725	Extension for reply within fourth month	
1001 750 2001 375 Utility filing fee	1255	1,970	2255	985	Extension for reply within fifth month	
1002 330 2002 165 Design filing fee	1401	320	2401	160	Notice of Appeal	
1003 520 2003 260 Plant filing fee	1402	320	2402	160	Filing a brief in support of an appeal	
1004 750 2004 375 Reissue filing fee	1403	280	2403	140	Request for oral hearing	
1005 160 2005 80 Provisional filing fee	1451	1,510	1451	1,510	Petition to institute a public use proceeding	
SUBTOTAL (1) (\$)	1452	110	2452	55	Petition to revive - unavoidable	
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE	1453	1,300	2453	650	Petition to revive - unintentional	
Fee from	1501		2501		Utility issue fee (or reissue)	<u> </u>
Extra Claims below Fee Paid Total Claims 20** = X	1502	470	2502		Design Issue fee	
Independent - 3** = X = =	1503	630	2503		Plant issue fee	<u> </u>
Multiple Dependent	1460	130	1460		Petitions to the Commissioner	
Large Entity Small Entity	1807	50	1807		Processing fee under 37 CFR 1.17(q)	180.
Fee Fee Fee Fee Description	1806	180	1806		Submission of Information Disclosure Stmt	100.
Code (\$) Code (\$) 1202 18 2202 9 Claims in excess of 20	8021	40	8021	40	Recording each patent assignment per property (times number of properties)	
1201 84 2201 42 Independent claims in excess of 3	1809	750	2809	375	Filing a submission after final rejection (37 CFR 1.129(a))	
1203 280 2203 140 Multiple dependent claim, if not paid	1810	750	2810	375	For each additional invention to be	
1204 84 2204 42 ** Reissue independent claims over original patent	1801	750	2801	275	examined (37 CFR 1.129(b))	
1205 18 2205 9 ** Reissue claims in excess of 20	1801	900	1802	900	Request for Continued Examination (RCE) Request for expedited examination	
and over original patent		500	1302	300	of a design application	
SUBTOTAL (2) (\$)		fee (sp				
**or number previously paid, if greater; For Reissues, see above	*Redu	ced by	Basic F	Filing F	ee Paid SUBTOTAL (3) $(\$)$ 1	80.

SUBMITTED BY (Complete (if applicable) Registration No. Name (Print/Type) Telephone Q 30,316 -4208 (Attorney/Agent) Signature

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PTO/SB/08A (02-03) Approved for use through 04/30/2003. OMB 0651-0031

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Substitute for form 1449/PTO

INFORMATION DISCLOSURE STATEMENT BY APPLICANT

(Use as many sheets as necessary)

er the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number. Complete if Known Application Number 10/008,488 Filing Date 11/05/2001 First Named Inventor Siegfried K. Hol Art Unit 2161 **Examiner Name** Dixon **Attorney Docket Number** P = 1783

			U. S. PATENT DO		
Examiner nitials*	Cite No. ¹	Document Number Number-Kind Code ^{2 (f known)}	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
		US-0001144 A1	05/10/2001	Kapp	COL E
		03-0034613 A1	10/25/2001	Rubsamen	
		US-0026332 A1	02/28/2002		0
		^{US-} 0099595 A1	07/25/2002	Kelly et al.	
		^{US-} 5077666	12/31/1991	Brimm et al.	
		^{US-} 5291399	03/01/1994	Chaco	
		^{US-} 5301105	04/05/1994	Cummings, Jr.	
	<u> </u>	^{US-} 5924074	07/13/1999	Evans	
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	FOREIGN PATENT DOCUMENTS								
Examiner Initials*	Cite No. ¹	Foreign Patent Document	Publication Date	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages				
		Country Code ^{3 -} Number ^{4 -} Kind Code ⁵ (if known)	MM-DD-YYYY		Or Relevant Figures Appear	T⁵			
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*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant. ¹ Applicant's unique citation designation number (optional). ² See Kinds Codes of USPTO Patent Documents at www.uspto.gov or MPEP 901.04. ³ Enter Office that issued the document, by the two-letter code (WIPO Standard ST.3). ⁴ For Japanese patent documents, the indication of the year of the reign of the Emperor must precede the serial number of the patent document. ⁵ Kind of document by the appropriate symbols as indicated on the document under WIPO Standard ST. 16 if possible. ⁵ Applicant is to place a check mark here if English language

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PTO/SB/08B (02-03)

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	for form 1449/PTO			Compl t if Known				
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INFO	RMATION	DIS	CLOSURE	Filing Date	11/05/2001	, 'O		
STA	TEMENT B	YA	APPLICANT First Named Inventor Siegfried K Ool 2		First Named Inventor Siegfried K Ool 2			
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	(USB as many snow	, is as 11	ecessary,	Examiner Name	T. Dixon	、夏贝		
Sheet	2	of	2	Attorney Docket Number	P-1783			
					7			

	_	OTHER PRIOR ART-NON PATENT LITERATURE DOCUMENTS	
Examiner Initials*	Cite No. ¹	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.	T ²
		PERSONALMD.COM Personalized Medical Information and Services website "In the Press" Consumers Embrace Online Health Records	
		PERSONALMD.COM Personalized Medical Information and Services "In the Press" Personalmd.com Unveils Three New Personalized Services	
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		WWW.TECHNEOS.COM website "Techneos Announces Sophisticated Software for Handheld Computers". Vancouver BC May 25, 2000 - Techneos Systems, Inc.	

Examiner	Date	
Signature	Considered	

^{*}EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

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1 Applicant's unique citation designation number (optional). 2 Applicant is to place a check mark here if English language Translation is attached.

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